

Application Data Sheet

Application Information

Application number::	Unknown
Filing Date::	Herewith
Application Type::	Regular
Subject Matter::	Utility
Suggested classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	No
Title::	Systems and Methods for Creating Network-Based Software Services Using Source Code Annotations
Attorney Docket Number::	BEAS-01445US1 SRM/DTX
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	15
Small Entity?::	No
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	US
Status::	Full Capacity
Given Name::	Kyle
Middle Name::	
Family Name::	Marvin
City of Residence::	Kingwood

State or Province of Residence:: TX
Country of Residence:: US
Street of mailing address:: 1710 Lofty Maple Trail
City of mailing address:: Kingwood
State or Province of mailing address:: TX
Country of mailing address:: US
Postal or Zip Code of mailing address:: 77345

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: David
Middle Name::
Family Name:: Remy
City of Residence:: Mercer Island
State or Province of Residence:: WA
Country of Residence:: US
Street of mailing address:: 3465 77th Avenue S.E.
City of mailing address:: Mercer Island
State or Province of mailing address:: WA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 98040

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: David
Middle Name::

Family Name:: Bau
City of Residence:: Gladwyne
State or Province of Residence:: PA
Country of Residence:: US
Street of mailing address:: 415 Howard
City of mailing address:: Gladwyne
State or Province of mailing address:: PA
Country of mailing address:: US
Postal or Zip Code of mailing address:: 19035

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity
Given Name:: Rod
Middle Name::
Family Name:: Chavez
City of Residence::
State or Province of Residence::
Country of Residence:: US
Street of mailing address::
City of mailing address::
State or Province of mailing address::
Country of mailing address:: US
Postal or Zip Code of mailing address::

Applicant Authority Type:: Inventor
Primary Citizenship Country:: US
Status:: Full Capacity

Given Name:: David
Middle Name::
Family Name:: Read
City of Residence::
State or Province of Residence::
Country of Residence:: US
Street of mailing address::
City of mailing address::
State or Province of mailing address::
Country of mailing address:: US
Postal or Zip Code of mailing address::

Correspondence Information

Correspondence Customer Number:: 23910
Phone number:: (415) 362-3800
Fax Number:: (415) 362-2928
Email address:: [atty@fdml.com]

Representative Information

Representative Customer Number:: 23910

Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This application	An application claiming benefit under 35 U.S.C. §119(e)	60/449,958	02/26/03

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::

Assignee Information

Assignee Name::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::